

## DECLARATION COMBINED WITH POWER OF ATTORNEY

Page 1 of 2

Attorney Docket No. 8308



As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **COMPOSITIONS FOR PREVENTION AND TREATMENT OF COLD AND INFLUENZA-LIKE SYMPTOMS AND THEIR METHODS OF USE**

the specification of which

(check one)  is attached hereto.  
 was filed on October 19, 2000 as United States Application No. or  
 PCT International Application Serial No. 09/692,634  
 and was amended on \_\_\_\_\_

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35 United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

(Number)	(Country)	(Day/Month/Year Filed)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Serial No.	Filing Date	Application Serial No.	Filing Date
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I hereby claim the benefit under Title 35 United States Code §120 of any United States application(s), or §365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35 United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)
09/421,131		10/19/1999	

As named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Atty Name	Atty Reg Number.	Associate Power of Attorney Attached
John M. Howell	33,713	[ ] Yes <input checked="" type="checkbox"/> No
Karen F. Clark	32,974	[ ] Yes <input checked="" type="checkbox"/> No
Steven W. Miller	31,984	[ ] Yes <input checked="" type="checkbox"/> No
T. David Reed	32,931	[ ] Yes <input checked="" type="checkbox"/> No
Timothy B. Guffey	41,048	[ ] Yes <input checked="" type="checkbox"/> No
James C. Kellerman	43,708	[ ] Yes <input checked="" type="checkbox"/> No
Betty J. Zea	36,069	[ ] Yes <input checked="" type="checkbox"/> No

SEND CORRESPONDENCE TO:

John M. Howell	(513) 622-2184
The Procter & Gamble Company	Phone No.
Health Care Research Center	
8700 Mason-Montgomery Rd. Mason OH 45040-9462	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventor Paul John Rennie

Inventor's signature Paul John Rennie

Date

Residence Ataraxia, Ballfield Road, Godalming, Surrey GU7 2HA, England

Citizenship British

Post Office Address Ataraxia, Ballfield Road, Godalming, England

Full name of second joint inventor, if any Simon Phillip King

Inventor's signature Simon Phillip King

Date 10/11/00

Residence 67, Heath Road, Weybridge, KT13 8TJ, England

Citizenship British

Post Office Address 67, Heath Road, Weybridge, KT13 8TJ, England

Full name of third joint inventor, if any Kimberly Ann Biedermann

Inventor's signature \_\_\_\_\_

Date

Residence 20 Trailbridge Drive, Cincinnati, Ohio 45241

Citizenship USA

Post Office Address 20 Trailbridge Drive, Cincinnati, Ohio 45241

Full name of fourth joint inventor, if any Jeffrey Michael Morgan

Inventor's signature \_\_\_\_\_

Date

Residence 8575 Highmount Drive, Springboro, Ohio 45066

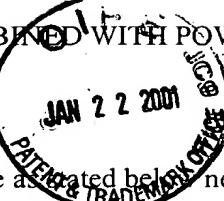
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<u>(Number)</u>	<u>(Country)</u>	<u>(Day/Month/Year Filed)</u>	<u>Yes</u>	<u>No</u>

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Inventor's signature \_\_\_\_\_

Date

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Citizenship British

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Full name of second joint inventor, if any Simon Phillip King

Inventor's signature \_\_\_\_\_

Date

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Full name of third joint inventor, if any Kimberly Ann Biedermann

Inventor's signature Kimberly Ann Biedermann

11/08/00

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Full name of fourth joint inventor, if any Jeffrey Michael Morgan

Inventor's signature Jeffrey Michael Morgan

11/08/00

Date

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Citizenship USA

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